

Table 9. California Workers' Compensation Claims: FROI and SROI Data Summary, by Year of Injury 2000 - 2008

Table#	TABLE	Y2000	Y2001	Y2002	Y2003	Y2004	Y2005	Y2006	Y2007	Y2008	TOTAL
10	FROI, TOTAL REPORTED INJURIES	738,901	932,280	887,815	846,440	800,524	753,836	729,497	688,234	613,759	6,991,286
11	SROI, TOTAL REPORTED MEDICAL ONLY	173,819	285,626	280,331	238,541	251,872	247,866	231,580	210,703	156,777	2,077,115
12	SROI, TOTAL REPORTED INDEMNITY	108,654	204,756	205,508	199,749	172,098	149,741	134,664	123,373	99,300	1,397,843
12a	<i>SROI Indemnity Claims, No Medical</i>	<i>24,499</i>	<i>33,417</i>	<i>29,126</i>	<i>32,719</i>	<i>29,469</i>	<i>25,598</i>	<i>31,571</i>	<i>40,810</i>	<i>38,032</i>	<i>285,241</i>
12b	<i>SROI Indemnity Claims, With Medical</i>	<i>84,155</i>	<i>171,339</i>	<i>176,382</i>	<i>167,030</i>	<i>142,629</i>	<i>124,143</i>	<i>103,093</i>	<i>82,563</i>	<i>61,268</i>	<i>1,112,602</i>
13	TOTAL DENIED CLAIMS	27,610	45,359	49,436	52,724	49,293	47,195	47,243	48,662	40,495	408,017
14	TOTAL, OTHER CLAIMS (NOC)	428,818	396,539	352,540	355,426	327,261	309,034	316,010	305,496	317,187	3,108,311

First Report of Injury (FROI)--Injured workers' claims based upon the reported calendar year of injury from 2000 through 2008 using DN 31 (date of injury). These are unique counts of Jurisdiction Claim Numbers (DN5) processed in the Workers' Compensation Information System (WCIS).

Subsequent Report of Injury (SROI), Medical Only--These are claims with the following benefit type codes (DN 95 - Paid To Date/Reduced Earnings/Recoveries): Payments to Physicians (350), Hospital Cost (360), Other Medical Cost (370), Unallocated Prior Medical (440), and Compromised Medical (501). Medical-only SROI counts exclude both denials and SROI claims with indemnity payments (\$ > 0). Medical-only claims include those with reported benefit payments (\$ > 0).

Subsequent Report of Injury (SROI), Indemnity--These claims are defined as those with the following benefit type codes (DN 85 - Payment/Adjustment):

- **Specific Permanent Disability (PD) Claims**--Permanent Total (020), Permanent Total Supplemental (021), Permanent Partial Scheduled (030), *Permanent Partial Unscheduled (040)*, Permanent Partial Disfigurement (090), and Fatal (010);
- **Specific Temporary Disability (TD) Claims**--Temporary Total (050), *Temporary Total Catastrophic (051)*, Temporary Partial (070), *Employers Liability (080)*, Employer Paid (240), *Vocational Rehabilitation Maintenance (410)*; and
- **Compromised Indemnity Claims**--Unspecified (500), Fatal (510), Permanent Total (520), Permanent Total Supplemental (521), Employer Paid (524), Permanent Partial Scheduled (530), *Permanent Partial Unscheduled (540)*, *Vocational Rehabilitation Maintenance (541)*, Temporary Total (550), *Temporary Total Catastrophic (551)*, Temporary Partial (570), *Employers Liability (580)*, and Permanent Partial Disfigurement (590).
- **NOTE**--The italicized codes included in the lists above should no longer be sent to the WCIS. Examples are: *Temporary Total Catastrophic (051) and (551)*; *Employers Liability (080) and (580)*; As of 1/1/2005, *Partial Unscheduled (040) and (540)*; As of 1/1/2009, *Vocational Rehabilitation Maintenance (410) and (541)*.

SROI Indemnity, No Medical--These indemnity claim counts (Table 12a) exclude those with medical claims and denied claims, and include claims with benefit payments (\$ > 0).

SROI Indemnity, With Medical--These indemnity claim counts (Table 12b) include those claims with benefit payments (\$ > 0) and with medical costs, and exclude denials defined under Table 13.

Denied Claims--The aggregate monthly count of denied claims is by year of injury. Claims based on the earliest denial date (DN 3 - MTC_DATE) and SROI transaction record (DN 2 - Maintenance Type Code), ie. MTC = '04' (Denial).

Other Claims, Not Otherwise Classified (NOC)--These are reported FROI claims that are not included in the categories of SROI Medical Only, SROI Indemnity, and Denials (Tables 11 thru 13). In other words, only a FROI has been reported for that claim.

A significant amount of variation across years results from noncompliance and late reporting of claims. DWC believes that its database is representative of claims in California's workers' compensation (WC) industry.

Source: WCIS Database, 5 May 2009